



**DECLARATION FOR PATENT APPLICATION, POWER OF  
ATTORNEY & DESIGNATION OF CORRESPONDENCE ADDRESS**

As below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**RAPID MULTISLICE BLACK BLOOD DOUBLE-INVERSION RECOVERY TECHNIQUE FOR  
BLOOD VESSEL IMAGING**

the specification of which (check one)

- ☐ is attached hereto, and  
☒ was filed on June 26, 2003, as U.S. Patent Application Serial No. 10/606,665.

I hereby state that I have reviewed and understand the contents of the above-identified specification including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with 37 CFR §1.56(a).

**Power of Attorney:** As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

Mark H. Jay, Reg. No. 27,507; G. Roger Lee, Reg. No. 28,963; John J. Gagel, Reg. No. 33,499; Robert C. Nabinger, Reg. No. 33,431; David L. Feigenbaum, Reg. No. 30,378; Paul A. Pysher, Reg. No. 40,780; Alan D. Smith, Reg. No. 32,005; Timothy A. French, Reg. No. 30,175; Sean P. Daley, Reg. No. 40,978; Brian J. Colandreo, Reg. No. 42,427; Kenneth F. Kozik, Reg. No. 36,572; and Frank Occhiuti, Reg. No. 35,306.

Direct all correspondence to customer number: 26161.

Address all telephone calls to G. ROGER LEE at telephone number (617) 542-5070.

I hereby declare that all statements made herein on my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under 18 USC §1001 and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full Name of First Inventor: ZAHY A. FAYAD	
Inventor's Signature <i>Zahy A. Fayad</i>	Date: 9/4/03
Residence: 1755 York Avenue #9G, New York, NY 10128	
Citizenship: Lebanon	
Post Office Address: 1755 York Avenue #9G, New York, NY 10128	

Full Name of First Inventor: VITALII V. ITSKOVICH	
Inventor's Signature <i>Vitalii V. Itskovich</i>	Date: 09/04/03
Residence: 154 Avenue P., Apt. B3, Brooklyn, NY 11204	
Citizenship: USA	
Post Office Address: 154 Avenue P., Apt. B3, Brooklyn, NY 11204	

Full Name of First Inventor: VENKATESH MANI	
Inventor's Signature <i>Venkatesh Mani</i>	Date: 09/04/03
Residence: 23 Hillside Avenue, 2 <sup>nd</sup> Floor, Rockaway, NJ 07866	
Citizenship: India	
Post Office Address: 23 Hillside Avenue, 2 <sup>nd</sup> Floor, Rockaway, NJ 07866	

Full Name of First Inventor: MICHAEL M. SZIMTENINGS	
Inventor's Signature	Date:
Residence: 2590 35 <sup>th</sup> Street, Apt. 4K, Astoria, NY 11103	
Citizenship: Germany	
Post Office Address: 2590 35 <sup>th</sup> Street, Apt. 4K, Astoria, NY 11103	

**DECLARATION FOR PATENT APPLICATION, POWER OF  
ATTORNEY & DESIGNATION OF CORRESPONDENCE ADDRESS**

As below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**RAPID MULTISLICE BLACK BLOOD DOUBLE-INVERSION RECOVERY TECHNIQUE FOR  
BLOOD VESSEL IMAGING**

the specification of which (check one)

- ☐ is attached hereto, and  
☒ was filed on June 26, 2003, as U.S. Patent Application Serial No. 10/606,665.

I hereby state that I have reviewed and understand the contents of the above-identified specification including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with 37 CFR §1.56(a).

**Power of Attorney:** As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

Mark H. Jay, Reg. No. 27,507; G. Roger Lee, Reg. No. 28,963; John J. Gagel, Reg. No. 33,499; Robert C. Nabinger, Reg. No. 33,431; David L. Feigenbaum, Reg. No. 30,378; Paul A. Pysher, Reg. No. 40,780; Alan D. Smith, Reg. No. 32,005; Timothy A. French, Reg. No. 30,175; Sean P. Daley, Reg. No. 40,978; Brian J. Colandreo, Reg. No. 42,427; Kenneth F. Kozik, Reg. No. 36,572; and Frank Occhiuti, Reg. No. 35,306.

Direct all correspondence to customer number: 26161.

Address all telephone calls to G. ROGER LEE at telephone number (617) 542-5070.

I hereby declare that all statements made herein on my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under 18 USC §1001 and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.



Full Name of First Inventor: ZAHI A. FAYAD	
Inventor's Signature	Date:
Residence: 1755 York Avenue #9G, New York, NY 10128	
Citizenship: Lebanon	
Post Office Address: 1755 York Avenue #9G, New York, NY 10128	

Full Name of First Inventor: VITALII V. ITSKOVICH	
Inventor's Signature	Date:
Residence: 154 Avenue P., Apt. B3, Brooklyn, NY 11204	
Citizenship: USA	
Post Office Address: 154 Avenue P., Apt. B3, Brooklyn, NY 11204	

Full Name of First Inventor: VENKATESH MANI	
Inventor's Signature	Date:
Residence: 23 Hillside Avenue, 2 <sup>nd</sup> Floor, Rockaway, NJ 07866	
Citizenship: India	
Post Office Address: 23 Hillside Avenue, 2 <sup>nd</sup> Floor, Rockaway, NJ 07866	

Full Name of First Inventor: MICHAEL M. SZIMTENINGS	
Inventor's Signature <i>Michael M. Szimtenings</i>	Date: 7/10/03
Residence: 2590 35 <sup>th</sup> Street, Apt. 4K, Astoria, NY 11103	
Citizenship: Germany	
Post Office Address: 2590 35 <sup>th</sup> Street, Apt. 4K, Astoria, NY 11103	